

215037816
60580

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 154	Agency Case No. B5-086201	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1 01	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 09/17/2015		TIME OF ACCIDENT 0734	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 0739	09/17/2015	
B 72	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. S. FOLSOM ST.		PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE	
C 1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D 1	IF AT INTERSECTION		IF NOT AT INTERSECTION			
		NAME OF INTERSECTING ROADWAY		<input checked="" type="radio"/> FEET <input type="radio"/> MILES N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING	
		21.00		X	ROSA PARKS WAY	
V1/M 01	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
V2/M 08	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN	
E 2	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
VEHICLE NO. 1						
F 1	DRIVER LICENSE NO.	G02064549		STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE
V1/N 5	DRIVER	SUSAN W DOUGHERTY		PHONE	402-438-1854	
V2/N 5	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	10/18/1954	
G 2	OWNER	SUSAN W DOUGHERTY DOB 10-18-54		PHONE	402-438-1854	
V1/O 2	VEHICLE	2008	Chevrolet	MALIBU	4 door Sedan	black
V2/O 2	VEHICLE ID NO. (VIN)	1G1ZJ57B98F218562		INSURANCE COMPANY	CALIFORNIA CAS. GENERAL-OREG	
I 1	DRIVER LICENSE NO.	H13298904		STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE
V1/P 1	DRIVER	ERIN N FREVERT		PHONE	402-215-8560	
V2/P 1	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	08/27/1992	
J 01	OWNER	BRIAN K FREVERT DOB 3-31-67 / TRACY J FREVERT		PHONE	402-490-2750	
V1/Q 4	VEHICLE	2007	Jeep	LIBERTY	Compact Utility	black
V2/Q 4	VEHICLE ID NO. (VIN)	1J4GL48K57W604180		INSURANCE COMPANY	AMERICAN FAMILY MUTUAL INSUR.	
K 01	TOWED TO	TOWED BY		POLICY NO.	2353-7636-03-79-FPPA-NE	
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						
VEH. #	NAME	ADDRESS		DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	3 Body Region	4 Injury Sev.
VEH. #	NAME	ADDRESS		DATE OF BIRTH (MM / DD / YYYY)	5 Trans.	SEX M F
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	
VEH. #	NAME	ADDRESS		DATE OF BIRTH (MM / DD / YYYY)	EMS RUN REPORT NO.	
	LOCAL NO.	MEDICAL FACILITY NAME		EMS SERVICE NAME	EMS RUN REPORT NO.	

INDICATE BY DIAGRAM WHAT HAPPENED

Indicate North by Arrow



Not To Scale




ROSA PARKS WAY

APOI:
8' 1" E OF ECL OF FOLSOM
&
20' 8" S OF SCL OF ROSA PARKS WAY

33'

Vehicle 1 was stopped, facing a Northerly direction, on Folsom, South side of Rosa Parks Way before a stop sign. Driver 1 said that she was completely stopped, signaling to turn right. Vehicle 2 rear ended Vehicle 1. Vehicle 2 was behind Vehicle 1. Driver 2 said that she thought that Vehicle 1 was moving and Driver 2 had her eyes on the left. Vehicle 2 struck Vehicle 1.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME			ADDRESS	PHONE
	NAME			ADDRESS	PHONE

VEHICLE MOVEMENT BEFORE COLLISION					POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS		VEH 1	1	VEH 2	1			
VEH NO.	N	S	E	W													ROAD OR HIGHWAY NAME				VEHICLE 1		VEHICLE 2		ALCOHOL TESTING
1	X				FOLSOM				POINT OF IMPACT 06		POINT OF IMPACT 02		1		Y		Y		Y						
2	X				FOLSOM				MOST DAMAGED AREA 06		MOST DAMAGED AREA 02		2		N	X	N	X	N						
1	11				06 Turning left 07 Making U-turn 08 Entering traffic lane				00 None		02 03 04		1												
2	08				09 Leaving traffic lane 10 Parked 11 Slowing or stopped in traffic 12 Other 13 Unknown				09 Top & windows 10 Undercarriage 11 Total (all areas) 12 Other		01 05		2				Driver No. 1 1		Driver No. 2 1						
01 Essentially straight ahead 02 Backing 03 Changing lanes 04 Overtaking/Passing 05 Turning right					09 Leaving traffic lane 10 Parked 11 Slowing or stopped in traffic 12 Other 13 Unknown																				
OFFICER NO. 720					TROOP/TEAM/BEAT SW					DEPARTMENT Lincoln Police Department					Photographs taken?  YES  NO										
INVESTIGATOR NAME <i>(Print or Type)</i> Kirk McAndrew										INVESTIGATOR SIGNATURE Approved by Ofc Kirk McAndrew										DATE OF REPORT 09/17/2015					